Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Together Holding Our Majority PAC PO Box 97275 ADDRESS (number and street) (Check if address is changed) Raleigh 27624 NC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Collin@cmandco.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) togetherholdingourmajority.com (Check if address is changed) DATE 2018 C00571323 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. McMichael, Collin, , , Type or Print Name of Treasurer McMichael, Collin, , , [Electronically Filed] 01 18 2018 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

EFO -	orm 1 (Payicad 02/2000)	Page 2			
	orm 1 (Revised 02/2009) COMMITTEE	Page 2			
Candida	te Committee:				
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	olete the candidate			
Name of Candidate					
Candidate Party Affilia	Office Sought: House Senate President	State			
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate					
Party Co	mmittee:				
(d)	· · · · · · · · · · · · · · · · · · ·	(Democratic, Republican, etc.) Party			
Political	Action Committee (PAC):				
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization				
	Corporation Corporation w/o Capital Stock	Labor Organization			
	Membership Organization Trade Association	Cooperative			
	In addition, this committee is a Lobbyist/Registrant PAC.				
(f) x	gregated fund or party				
	In addition, this committee is a Lobbyist/Registrant PAC.				
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Joint Fun	draising Representative:				
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political			
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political			
Coi	mmittees Participating in Joint Fundraiser				
1.	FEC ID number				
2.	FEC ID number				
3.	FEC ID number				
4.					

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Write or Type Committee Name		
Together Holding	g Our Majority PAC	
6. Name of Any Connected Org	ganization, Affiliated Committee, Joint Fundraising Representative, or Lead	dership PAC Sponsor
Mailing Address	PO BOX 97396 RALEIGH CITY STATE Organization Affiliated Committee Joint Fundraising Representative	ZIP CODE Leadership PAC Sponsor
. Custodian of Records: Identification books and records.	fy by name, address (phone number optional) and position of the person in	possession of committee
Full Name McMichael, I will be a second of the control of the c	Collin, , , , PO Box 97275 Raleigh NC 2762	
Little or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 919 –	889 - 1817
Treasurer: List the name and any designated agent (e.g., as:	address (phone number optional) of the treasurer of the committee; and the sistant treasurer).	e name and address of
Full Name of Treasurer Mailing Address McMichael, C	Collin, , , PO Box 97275	
L	Raleigh NC 2762	ZIP CODE
Title or Position Treasurer	919 Telephone number	889 - 1817

T LC FOI	m 1 (Revised	d 02/2009)	Page 4
Full Name of Designated			
Agent			
Mailing Address			
		CITY STATE	ZIP CODE
Title or Position			
		Telephone number	
 Banks or Othe safety deposit b 	oxes or mair	ntains funds.	
safety deposit b Name of Bank, Mailing Address	Depository, 6	ntains funds.	
safety deposit b Name of Bank,	Depository, 6	ntains funds. etc.	
safety deposit b Name of Bank,	Depository, 6	ntains funds. etc.	5 1
safety deposit b Name of Bank,	Depository, 6	ntains funds. etc. 6659 Falls of Neuse Road	5 ZIP CODE
safety deposit b Name of Bank,	Depository, e	Raleigh CITY STATE	
safety deposit by Name of Bank, Mailing Address	Depository, e	Raleigh CITY STATE	
safety deposit by Name of Bank, Mailing Address	Depository, e	Raleigh CITY STATE	
safety deposit by Name of Bank, Mailing Address	Depository, e	Raleigh CITY STATE	
safety deposit by Name of Bank, Mailing Address Name of Bank,	Depository, e	Raleigh CITY STATE	
safety deposit by Name of Bank, Mailing Address Name of Bank,	Depository, e	Raleigh CITY STATE	

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected TILLIS MAJORIT	Organization, Affiliated Committee, Joint Fundry Y COMMITTEE	aising Representative	e, or Leadership PAC Spon
Mailing Address	PO Box 97275		
	1		
	Raleigh	NC	27624
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	by name, address (phone number – optional)	Tunuraising nepresent	Leadership FAC S
esignated Agent: Identify		Tunuraising nepresent	Leadership FAC S
esignated Agent: Identify		Tunuraising nepresent	Leadership FAC 5
esignated Agent: Identify		Tunuraising nepresent	Leadership FAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identify	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	ries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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3. 4. FEC ID number C FEC ID number C Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership TILLIS-NRSC COMMITTEE Mailing Address 228 S. WASHINGTON ST. STE. 115 ALEXANDRIA VA 22314 Relationship: CITY A STATE A ZIP	
A. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership TILLIS-NRSC COMMITTEE Mailing Address 228 S. WASHINGTON ST. STE. 115 ALEXANDRIA VA 22314 Relationship: CITY A STATE A ZIP	
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership TILLIS-NRSC COMMITTEE Mailing Address 228 S. WASHINGTON ST. STE. 115 ALEXANDRIA Relationship: CITY STATE ZIP	
TILLIS-NRSC COMMITTEE Mailing Address 228 S. WASHINGTON ST. STE. 115 ALEXANDRIA Relationship: CITY STATE ZIP	
Mailing Address 228 S. WASHINGTON ST. STE. 115 ALEXANDRIA Relationship: CITY ▲ STATE ▲ ZIP	PAC Sponsor
Mailing Address STE. 115 ALEXANDRIA Relationship: CITY ▲ STATE ▲ ZIP	
Mailing Address STE. 115 ALEXANDRIA Relationship: CITY ▲ STATE ▲ ZIP	
ALEXANDRIA VA 22314 Relationship: CITY ▲ STATE ▲ ZIP	
Relationship: CITY ▲ STATE ▲ ZIP	
Connected Organization Affiliated Committee Joint Fundraising Representative Leader	CODE ▲
	ship PAC Sponsor
B. Designated Agent: Identify by name, address (phone number – optional) Full Name	
Mailing Address	
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP C	ODE A
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds ac safety deposit boxes or maintains funds. Name of Bank, Depository, etc.	counts, rents
Mailing Address	
CITY ▲ STATE ▲ ZIP C	